

	Unit 1 Santa Clara City Firefighters, IAFF Local 1171	Unit 2 Police Officers Association	Unit 2R Police Officers Association - Recruits	Unit 3 International Brotherhood of Electrical Workers (IBEW) Local 1245	Unit 4 Engineers of the City of Santa Clara	Unit 5, 7, 8 City of Santa Clara Employees' Association	Unit 6 Field Operations and Maintenance, AFSCME Local 101	Unit 9 Miscellaneous Unclassified Management	Unit 9A Unclassified Police Management Association	Unit 9B Santa Clara Fire Management	Unit 10 Public Safety Non-Sworn Employees Association (PSNSEA)
<b>California Public Employees Retirement System (CalPERS)</b>											
Formula (Classic)	3.0% @ 50	3.0% @ 50	2.7% @ 55	2.7% @ 55	2.7% @ 55	2.7% @ 55	2.7% @ 55	2.7% @ 55	3.0% @ 50	3.0% @ 50	2.7% @ 55
CalPERS Employee Rate	9.000%	11.250%	8.00%, minus \$61 bi-weekly	8.00%, minus \$61 bi-weekly	8.00%, minus \$61 bi-weekly	8.00%, minus \$61 bi-weekly	8.00%, minus \$61 bi-weekly	8.00%, minus \$61 bi-weekly	11.250%	9.000%	8.00%, minus \$61 bi-weekly
CalPERS Employer Rate Including UAL	51.700%	49.450%	33.980%	33.980%	33.980%	33.980%	33.980%	33.980%	49.450%	51.700%	33.980%
Formula (PEPRA)	2.7% @ 57	2.7% @ 57	2.0% @ 62	2.0% @ 62	2.0% @ 62	2.0% @ 62	2.0% @ 62	2.0% @ 62	2.7% @ 57	2.7% @ 57	2.0% @ 62
CalPERS Employee Rate	10.500%	10.500%	6.500%	6.500%	6.500%	6.500%	6.500%	6.500%	10.500%	10.500%	6.500%
CalPERS Employer Rate Including UAL	51.700%	49.450%	33.980%	33.980%	33.980%	33.980%	33.980%	33.980%	49.450%	51.700%	33.980%
<b>Social Security</b>											
Employee Rate:	N/A	N/A	6.20% up to \$8,239.80	6.20% up to \$8,239.80	6.20% up to \$8,239.80	6.20% up to \$8,239.80	6.20% up to \$8,239.80	6.20% up to \$8,239.80	N/A	N/A	6.20% up to \$8,239.80
Employer Rate:	N/A	N/A	6.20% up to \$8,239.80	6.20% up to \$8,239.80	6.20% up to \$8,239.80	6.20% up to \$8,239.80	6.20% up to \$8,239.80	6.20% up to \$8,239.80	N/A	N/A	6.20% up to \$8,239.80
<b>Medicare - Hired After 3/31/1986</b>											
Employee Rate:	1.45%	1.45%	1.45%	1.45%	1.45%	1.45%	1.45%	1.45%	1.45%	1.45%	1.45%
Employer Rate:	1.45%	1.45%	1.45%	1.45%	1.45%	1.45%	1.45%	1.45%	1.45%	1.45%	1.45%
Additional Medicare Tax of 0.9% is applicable to earnings over \$200,000 if an individual, or over \$250,000 if married & filing jointly											
<b>Health Insurance (offered through CalPERS)</b>											
Health Flex Contribution (never paid out to employee in cash)	\$136.00	\$136.00	\$136.00	\$136.00	\$136.00	\$136.00*	\$136.00	\$136.00	\$136.00	\$136.00	\$136.00
Regular Flex Contribution (if monthly premium is less than Health Flex + Regular Flex, the difference is paid to employee)	\$634.02	\$699.66	\$699.66	\$634.00	\$810.86	\$810.86*	\$810.86	\$810.86	\$699.66	\$634.02	\$1,125.76
Additional Flex (never paid out to employee in cash, except IBEW)	\$0.00	\$134.36	\$134.36	Varies depending on coverage level	\$23.16	\$23.16*	\$593.17	\$23.16	\$134.36	0	\$84.36
<b>Maximum Total Employer Contribution</b>	<b>\$770.02</b>	<b>\$970.02</b>	<b>\$970.02</b>	<b>\$2002.84</b>	<b>\$970.02</b>	<b>\$970.02*</b>	<b>\$1,540.03</b>	<b>\$970.02</b>	<b>\$970.02</b>	<b>\$770.02</b>	<b>\$1,346.12</b>
Cash paid to employee if an employee opts out of coverage without attestation of having Minimum Essential Coverage (MEC) <u>other than individual coverage</u>	\$634.02	\$699.66	\$699.66	\$634.00	\$810.86	\$810.86*	\$810.86	\$810.86	\$699.66	\$634.02	\$1125.76
Cash-in-Lieu (available only with annual attestation of having MEC <u>other than individual coverage</u> )	\$136.00	\$136.00	\$136.00	\$136.00	\$136.00	\$136.00*	\$136.00	\$136.00	\$136.00	\$136.00	\$136.00
Cash paid to employee if an employee opts out of coverage with attestation of having MEC other than individual coverage	\$770.02	\$835.66	\$835.66	\$770.00	\$946.86	\$946.86*	946.86	\$946.86	\$835.66	\$770.02	\$1261.76
<b>Retiree Medical Reimbursement Benefit</b>											
Monthly Reimbursement Maximum - up to age 65	\$364	\$364	\$364	\$364	\$364	\$364	\$364	\$364	\$364	\$364	\$364
Monthly Reimbursement Maximum - after age 65	\$218	\$218	\$218	\$218	\$218	\$218	\$218	\$218	\$218	\$218	\$218
Employees who retire from the City with at least ten (10) years of service shall receive reimbursement to help cover retiree single health insurance premiums. The reimbursement maximum includes the PEMHCA minimum.											
<b>Dental Insurance</b>											
City Maximum Contribution	N/A	\$22.22	\$22.22	\$22.22	\$22.22	\$22.22*	\$22.22	\$22.22	\$22.22	\$22.22	\$22.22
<b>Vision Insurance</b>											
City Maximum Contribution	\$0.00	\$9.02	\$9.02	\$9.02	\$9.02	\$9.02*	\$9.02	\$9.02	\$9.02	\$0.00	\$9.02
<b>Life Insurance</b>											
Coverage	\$10,000	\$15,000	\$15,000	\$25,000	\$50,000	\$15,000	\$20,000	\$50,000	\$20,000	\$40,000	\$50,000
Monthly Premium (City Paid)	\$2.80	\$4.20	\$4.20	\$7.00	\$14.00	\$4.20*	\$5.60	\$14.00	\$5.60	\$11.20	\$14.00
<b>State Disability Insurance (SDI)/Paid Family Leave (PFL)</b>											
Coverage	N/A	N/A	N/A	Maximum benefit is \$1,252/week	Maximum benefit is \$1,252/week	Maximum benefit is \$1,252/week	Maximum benefit is \$1,252/week	Maximum benefit is \$1,252/week	N/A	N/A	Maximum benefit is \$1,252/week
Employee Cost				1% of gross pay; max deduction of \$1,183.71	1% of gross pay; max deduction of \$1,183.71	1% of gross pay; max deduction of \$1,183.71	1% of gross pay; max deduction of \$1,183.71	1% of gross pay; max deduction of \$1,183.71			1% of gross pay; max deduction of \$1,183.71
<b>Long Term Disability (LTD) Insurance</b>											
Coverage	N/A - offered through association	N/A - offered through association	N/A - offered through association	N/A	N/A	2/3 of basic wage up to \$7,500; max of \$5,000/month	60% of basic wage up to \$7,500; max of \$4,500/month	60% of basic wage up to \$13,333; max \$8,000/month	N/A	N/A	2/3 of basic wage up to \$7,500; max of \$5,000/month
Monthly Premium						City pays \$.62/\$100 of insured earnings*	Employee pays \$.495/\$100 of insured earnings	City pays \$.23/\$100 of insured earnings			City pays \$.62/\$100 of insured earnings
<b>457 Deferred Compensation Contribution</b>											
Monthly City Contribution	N/A	\$150.00	\$150.00	N/A	N/A	N/A	N/A	N/A	\$150.00	N/A	\$100.00
<b>Voluntary Employee Beneficiary Association (VEBA) Account</b>											
Monthly City Contribution	\$250.00	\$150.00	\$150.00	\$100.00	\$50.00	\$50.00*	\$50.00	\$50.00	\$50.00	\$250.00	\$50.00

\*Part-time employees are eligible for a pro-rated total city contribution based on FTE  
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Vacation											
Completed Years of Service:	40 Hour Per Week Employees:  1-9 years: 120 hours/year 10-20 years: 160 hours/year 21+ year: 192 hours/year	1-9 years: 120 hours/year 10-15 years: 160 hours/year 16-20 years: 176 hours/year 21+ years: 192 hours/year	1-9 years: 120 hours/year 10-15 years: 160 hours/year 16-20 years: 176 hours/year 21+ years: 192 hours/year	1-4 years: 80 hours/year 5-9 years: 120 hours/year 10-15 years: 160 hours/year 16-20 years: 176 hours/year 21+ years: 192 hours/year	1-4 years: 80 hours/year 5-9 years: 120 hours/year 10-15 years: 168 hours/year 16-20 years: 176 hours/year 21+ years: 192 hours/year	1-4 years: 80 hours/year 5-9 years: 120 hours/year 10-15 years: 168 hours/year 16-20 years: 176 hours/year 21+ years: 192 hours/year	1-4 years: 80 hours/year 5-9 years: 120 hours/year 10-15 years: 160 hours/year 16-20 years: 176 hours/year 21+ years: 192 hours/year	1-4 years: 80 hours/year 5-9 years: 120 hours/year 10-15 years: 168 hours/year 16-20 years: 176 hours/year 21+ years: 192 hours/year	1-9 years: 120 hours/year 10-15 years: 160 hours/year 16-20 years: 176 hours/year 21+ years: 192 hours/year	40 Hour Per Week Employees:  1-9 years: 120 hours/year 10-20 years: 160 hours/year 21+ year: 192 hours/year	1-4 years: 80 hours/year 5-9 years: 120 hours/year 10-15 years: 168 hours/year 16-20 years: 176 hours/year 21+ years: 192 hours/year
Maximum Accrual Annual Vacation Cashout Maximum	400 hours 40 hours	400 hours 60 hours	400 hours 60 hours	400 hours 40 hours	400 hours 40 hours	400 hours 40 hours	400 hours 40 hours	400 hours 80 hours	450 hours 80 hours	400 hours 80 hours	400 hours 40 hours
Completed Years of Service:	24-Hour Shift Employees: 1-9 years: 192 hours/year 10-19 years: 240 hours/year 20+ years: 288 hours/year									24-Hour Shift Employees: 1-9 years: 192 hours/year 10-19 years: 240 hours/year 20+ years: 288 hours/year	
Maximum Accrual Annual Vacation Cashout Maximum Usage Restriction	672 hours 56 hours Cannot use vacation during first 12 months	Cannot use vacation during first 6 months	Cannot use vacation during first 6 months	Cannot use vacation during first 6 months	Cannot use vacation during first 6 months	Cannot use vacation during first 6 months	Cannot use vacation during first 6 months	Cannot use vacation during first 6 months	Cannot use vacation during first 6 months	Cannot use vacation during first 6 months	Cannot use vacation during first 12 months
Employee must be in a paid status for at least 2/3 of the hours of a pay period to accrue vacation											
Sick Leave											
Annual Accrual Max Sick leave usage for Family Sick Leave (Annual) Sick leave usage for Personal Leave (Annual)	40 Hour Per Week Employees:  96 hours 48 hours 32 hours	96 hours 48 hours 32 hours	96 hours 48 hours 32 hours	96 hours 48 hours 32 hours	96 hours 48 hours 32 hours	96 hours 48 hours 40 hours	96 hours 48 hours 40 hours	96 hours 48 hours 32 hours	96 hours 48 hours 32 hours	40 Hour Per Week Employees:  96 hours 48 hours 32 hours	96 hours 48 hours 40 hours
Annual Accrual Sick leave usage for Family Sick Leave (Annual) Sick leave usage for Personal Leave (Annual) Maximum Accrual	24-Hour Shift Employees: 288 hours 144 hours 60 hours Unlimited	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited	24-Hour Shift Employees: 288 hours 144 hours 60 hours Unlimited	Unlimited
Employee must be in a regular paid status, excluding hours charged for use of sick leave or personal leave, for at least 36 hours per pay period for 40 hour per week employees (or 50 hours per pay period for 24-hour shift employees) in order to accrue sick leave											
Sick Leave to Vacation Conversion: 40 hour per week Employees can convert sick leave to vacation on a two-to-one basis. Maximum of 96 hours of sick leave to 48 hours of vacation annually 24-hour shift Employees can convert sick leave to vacation on a three-to-one basis. Maximum of 216 hours of sick leave for 72 hours of vacation annually											
Sick Leave Cash Payout: Partial sick leave payoff provision on retirement depending on years of service and sick leave cap (balance as of 01/01/2004 plus 1,500 hours (or 3,000 hours for 24-hour shift employees))											
Compensatory Time Off (CTO)											
Maximum Accrual (accrued in lieu of overtime hours)	96 hours	200 hours	200 hours	240 hours	240 hours	240 hours 100 hours for Library & Fire Non-Sworn	240 Hours	N/A	N/A	N/A	200 hours for Police Non-Sworn 100 hours for Fire Non-Sworn
Awarded CTO				16 hours of PCTO is credited to employees each January 1st (prorated if hired after January 1st)	16 hours of PCTO is credited to employees each January 1st (prorated if hired after January 1st)	16 hours of CTO is credited to employees each January 1st (prorated if hired after January 1st)	16 hours of CTO is credited to employees each January 1st (prorated if hired after January 1st)				16 hours of CTO is credited to employees each January 1st (prorated if hired after January 1st)
Management Leave											
Annual	N/A	N/A	N/A	N/A	N/A	N/A	N/A	120 hours	120 hours	120 hours (168 hours for 24- hour shift employees)	N/A
Maximum Banked Leave								180 hours	180 hours	180 hours (252 hours for 24- hour shift employees)	
Holidays & Holiday Pay											
# of 8-hour Holidays (for 40 hour per week employees) Holiday Pay (paid per pay period)	13 4.92% of base salary for 24 hour shift employees	N/A 104 hours/year	N/A 104 hours/year	14 N/A	13 N/A	13 N/A	13 N/A	13 N/A	13 N/A	13 104 hours/year (for 24 hour shift employees)	13 N/A
Uniform Allowance											
Annual Amount (paid out bi-weekly)	\$200 \$275 for Depty Fire Marshals	\$600	N/A	N/A	N/A	N/A	N/A	N/A	\$600	\$260	\$600 for eligible classifications

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Equipment Reimbursements											
	N/A	N/A	N/A	Not to exceed \$280 reimbursement for safety footwear, safety clothing, and tools per fiscal year. See MOU for details	Not to exceed \$200 reimbursement for Personal Safety Equipment. See MOU for details	Raingear: Up to \$120 per fiscal year for eligible classifications Safety Boots: Upt to \$237 per fiscal year for eligi le employees Walking Shoes: Up to \$120 per fiscal year for eligible classifications (See MOU for details) Tools: \$500 per fiscal year reimbursement for Auto Foreperson	\$400 per fiscal year Personal Safety Equipment & Raingear Allowance  Up to \$500 per fiscal year for Automotive Technician Tools Reimbursement for Automotive Technician I/II/III (See MOU for details)	N/A	N/A	N/A	N/A
Phone Allowance											
	N/A	N/A	N/A	N/A	N/A	\$80/month for Senior Key Customer Representative(s) and Key Customer Representative(s)	N/A	\$80/month in lieu of carrying a City-issued cell phone	\$80/month in lieu of carrying a City-issued cell phone	\$80/month in lieu of carrying a City-issued cell phone	N/A
Educational Incentive Pay											
	N/A	2.5% of base pay for Intermediate POST Certification. Additional 2.5% of base pay for Advanced POST Certification	N/A	N/A	N/A	N/A	N/A	N/A	2.5% of base pay for Intermediate POST Certification. Additional 2.5% of base pay for Advanced POST Certification	N/A	N/A
Psychological Counseling											
	Up to 10 visits per year. Employee pays \$10 for first 6 visits. Uninsured costs of last 4 visits are shared equally by the City and employee	Employee pays \$10 for each visit. The uninsured costs of all visits are borne by the City	Employee pays \$10 for each visit. The uninsured costs of all visits are borne by the City	N/A	N/A	N/A	N/A	N/A	N/A	Up to 10 visits per year. Employee pays \$10 for first 6 visits. Uninsured costs of last 4 visits are shared equally by the City and employee	At least 5 and up to 10 visits per incident. Available to employee and dependents. Employee pays 10% of the cost of each visit
Tuition Reimbursement Program											
	Up to \$2,000 per fiscal year for tuition reimbursement. See CMD 26 for details	Up to \$2,000 per fiscal year for tuition reimbursement. See CMD 26 for details	Up to \$2,000 per fiscal year for tuition reimbursement. See CMD 26 for details	Up to \$2,000 per fiscal year for tuition reimbursement. See CMD 26 for details	Up to \$2,000 per fiscal year for tuition reimbursement. See CMD 26 for details	Up to \$2,000 per fiscal year for tuition reimbursement. See CMD 26 for details	Up to \$2,000 per fiscal year for tuition reimbursement. See CMD 26 for details	Up to \$2,000 per fiscal year for tuition reimbursement. See CMD 26 for details	Up to \$2,000 per fiscal year for tuition reimbursement. See CMD 26 for details	Up to \$2,000 per fiscal year for tuition reimbursement. See CMD 26 for details	Up to \$2,000 per fiscal year for tuition reimbursement. See CMD 26 for details
Employee Assistance Program (EAP)											
	Three consultations per family member per incident per year; City paid premium is \$6.49/month	N/A	N/A	Three consultations per family member per incident per year; City paid premium is \$6.49/month	Three consultations per family member per incident per year; City paid premium is \$6.49/month	Three consultations per family member per incident per year; City paid premium is \$6.49/month	Three consultations per family member per incident per year; City paid premium is \$6.49/month	Three consultations per family member per incident per year; City paid premium is \$6.49/month	Three consultations per family member per incident per year; City paid premium is \$6.49/month	Three consultations per family member per incident per year; City paid premium is \$6.49/month	Three consultations per family member per incident per year; City paid premium is \$6.49/month
Miscellaneous Benefits:											
	N/A	N/A	N/A	N/A	Professional Registration: The City will pay cost of Professional Engineer registration fee. Employees eligible for \$3,600 per year in premium pay for attaining and continued maintenance and possession of Professional Engineering Certification	N/A	N/A	Auto Allowance (alternative to mileage reimbursement or use of City vehicle): Department Heads receive \$320/month (up to \$520, with City Manager approval). Other Unit 9 employees can receive \$200/month (Up to \$500 with City Manager approval)	N/A	Residency Benefit: Employees who reside within a 50 minute reponse requirement shall receive an annual stipend of \$250 based on their residency the first full pay period of each MOU year, and a Code 3 take home vehicle	Paid Meal Break: Employees in all Communications Dispatcher classifications and in classifications of Police Records Specialist II, Police Records Supervisor, Community Service Officer I/II, and Jail Service Officer will be paid for meal break during regularly scheduled shift and will be subject to call back during the meal period

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